

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000483383

**Entity Name:** 40, LLC

**Current Principal Place of Business:**

8019 JOFFRE DRIVE  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

8019 JOFFRE DRIVE  
JACKSONVILLE, FL 32210

**FEI Number:** 93-4410319

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ENCARNACION, CHRISTOPHER R  
8019 JOFFRE DRIVE  
JACKSONVILLE, FL 32210 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AR
Name	ENCARNACION, CHRISTOPHER R	Name	CRUZ, KEVIN
Address	8019 JOFFRE DRIVE	Address	6716 PAUL REVERE CT, ORLANDO
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	ORLANDO FL 32809

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ENCARNACION , CHRISTOPHER R

CHRISTOPER  
ENCARNACION

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date